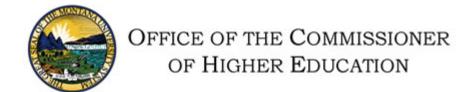
<u>PERKINS NONTRADITIONAL OCCUPATIONS</u> <u>CTE PROGRAMS OF STUDY</u> GRANTS

2013 - 2014 RFP





August 2013

GRANT APPLICATION DUE DATE: 5:00 P.M. ON SEPTEMBER 20, 2013

Notice of Nondiscrimination

It is the policy of the Office of the Commissioner of Higher Education that there will be no discrimination or harassment on the grounds of race, color, sex, marital status, religion, national origin, age, sexual orientation, or disability in any educational programs, activities, or employment. Persons having questions about equal opportunity and nondiscrimination should contact the Office of the Commissioner of Higher Education MOA Coordinator at kwicks@montana.edu.

Montana Office of the Commissioner of Higher Education 2500 Broadway Helena, MT 59620



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Perkins Nontraditional Occupations CTE Programs of Study Demonstration Grants

<u>Purpose</u>: To recruit and retain students within a CTE Program of Study (secondary + post-secondary) that leads to a high skill, high wage, or high demand occupation that is nontraditional by gender.

Nontraditional Occupations by Gender:

Males Females

Nursing/Healthcare Early Childhood Education/Teaching K-3 Science, Technology, Engineering, Math (STEM) Trades (e.g., Construction, Manufacturing)

<u>Awards</u>: Up to <u>six</u> one year grant awards of <u>no more than \$15,000</u> each will be available to Perkins eligible: school districts, two-year programs, tribal colleges, community colleges or consortia to support the successful recruitment and retention of students in CTE Programs of Study (POS) that lead to a career which is nontraditional by gender*.

*Note: Only Perkins Eligible entities in good standing are eligible to apply.

Important Dates:

- Application deadline: September 20, 2013
- Grant winners notified: October 24, 2013
- Grant funds available: July 1, 2013 June 30, 2014
- Final Narrative Report deadline: June 1, 2014
- Final Fiscal Closeout Report Due: August 15, 2014

<u>Secondary and Postsecondary Involvement</u>: Collaboration between secondary and postsecondary institutions is highly encouraged. Applications demonstrating partnership between secondary and postsecondary entities will be given preference.

Use of Funds: Funds **MAY** be used to (list is not inclusive):

- Create or purchase materials about careers that are nontraditional by gender
- Develop and implement a non-traditional after-school work experience or internship
- Provide or attend training about nontraditional careers for CTE POS teachers, instructors, and faculty
- Bring nontraditional role models to high schools with CTE POS to describe their experiences to students
- Pay for field trips to events, jobs or training centers featuring nontraditional workers
- Provide secondary/postsecondary instructors with collaboration time to review and revise curriculum, program environment, or teaching strategies designed to recruit and retain nontraditional students
- Implement new recruiting or retention strategies within a CTE Program of Study
- Develop a mentor system using former students and/or current practitioners

Funds **CANNOT** be used to:

- Purchase equipment with a value exceeding \$300
- Pay for college tuition or fees
- Pay for promotional materials such as T-shirts, cups or keychains

<u>Commitment of Participation, Reporting and Evaluation</u>: Full participation includes providing necessary reports, including a written final report that documents project activities, populations served, and outcomes achieved, as well as a final expenditure sheet at year end.

Application Materials and Instructions: Complete applications must include the following:

- Application Cover Page (Attached)
- Proposal Narrative (See attached "Narrative and Budget Information" for instructions on what to address and "2013-14 Scoring Guide" for the criteria and scoring process that will be used to evaluate proposals)
- Proposed Budget Worksheet (Attached)
- Statement of Assurances (Attached)

Application Submission Process: To be considered for funding, an electronic version of the complete application, including a scanned copy of the signed Statement of Assurances, must be received by 5:00 pm on September 20, 2013. Faxed copies will not be accepted. Electronic copies should be sent to: kwicks@montana.edu

In addition, a hard copy of the completed application should be mailed by DATE to:

Kali Wicks, Perkins Accountability Specialist Office of the Commissioner of Higher Education PO Box 203201 Helena, MT 59620

Questions: For questions about the submission process, please contact Perkins Accountability Specialist Kali Wicks at 406-444-0313 or kwicks@montana.edu.



FORMAT FOR PROPOSALS REQUEST FOR PROPOSALS FOR FUNDS FROM THE CARL D. PERKINS CAREER AND TECHNICAL EDUCATION ACT OF 2006

Non-Traditional RFP 2013-2014

IMPORTANT: Please type or print in ink. RESULT IN FORFEITURE OF GRANT MON			MPLETE OR UNS	SIGNED REPORTS COULD
Eligible Recipient-Secondary and Postsecondary In	stitution(s)	Date of Application	Applicant or P	roject ID Number
Title of Proposed Project in 14 words or less	(if applicab	le):		
Project Director				
Director's Address	City	State	Zip	
Telephone Number (s)		Email Address		
Fax Number (s)				
Fiscal Staff		Phone Number	Email	
CERTIFICATION I certify to the best of my knowledge and beliously obligations are for the purposes set forth in the		cuments.	-	outlays and unliquidated
Project Director's Signature:		D	ate Signed:	
	of P.L.105-3		CATION ACT O applicable federal a	nd state rules and regulations,
case to supplant, state or local funds. The applicant assures the Montana Board of Reg P.L.105-332, will not discriminate or violate pro of 1964, or Section 504 of the Rehabilitation Act	ents that serv	vices provided under the appr	oved project will be	e provided in accordance with
Signature LEA Dean or Principal		Printed Name		Date
Signature LEA Project Director		Printed Name		Date
Signature LEA Fiscal Agent		Printed Name		Date

Narrative & Budget Information

Address proposal and budget narrative in 4-6 pages. The Proposed Budget Worksheet that follows is an additional page that must be included with the application.

- 1) How does this project encourage the successful recruitment and retention of males or females within a CTE Program of Study that leads to an occupation that is nontraditional by gender? (Males in nursing/healthcare or early childhood education/teaching K-3. Females in STEM-related careers or the trades.)
 - What are the major activities or strategies that will be carried out and by whom?
 - How do proposed activities at the secondary level link to postsecondary component, or vice versa?
 - What is the timeline for this project?
- 2) What are the Secondary and Postsecondary project goals and intended outcomes?
 - How will the development, implementation, and evaluation of the project impact both secondary and postsecondary components of a CTE Program of Study that leads to a nontraditional occupation?
 - Describe goals and outcomes in detail and how these relate to the project's activities.
 - How many students does the project intend to reach? Males? Females?
- 3) How will the proposed project help the recipient's performance on the Perkins performance measures related to Nontraditional Occupations, especially 6S1/5P1 (nontraditional participation at the high school/postsecondary level)? How do you intend to evaluate your progress in meeting the project's stated goals and outcomes?
 - Include information about the applicant's most recent performance on Perkins measure 6S1/5P1
 - Describe the evaluation plan and activities
 - Identify the responsible parties for the evaluation activities
- 4) Complete the proposed Budget Sheet and provide no more than a one-page Budget Narrative of explanation of the budget—with the focus on the expenditure of these Perkins funds.

SAMPLE Budget Worksheet

Title of Project:	
Project Start Date:	Project End Date: June 30, 2014

	Perkins Nontraditional Grant Funds	LOCAL*	IN-KIND & OTHER SOURCE*	TOTAL
A. Staff				
Salaries				
Benefits				
In-State Travel				
Professional Development				
Other				
B. Students				
In-State Travel				
Supplies				
Other				
C. Supplies and Equipment				
Office Supplies (phone, copier, etc.)				
Instructional Supplies				
Equipment (less than \$300)				
Other				
D. Indirect/Overhead Indirect Cost @ 5% maximum				
E. Other (Include explanation)				
COLUMN TOTAL				

^{*}Matching funds from other sources are not required.

Statement of Assurances

Assurances form a binding agreement between the eligible recipient fiscal agent, the Montana Office of the Commissioner of Higher Education, and the U.S. Department of Education that assures all legal requirements are met in accordance with state and federal laws, regulations, and rules. These assurances apply to program activities and expenditures of funds. Compliance to general and specific program assurances is the legal responsibility of the eligible recipient under the authorization of the local board of education.

Fiscal Agent Name:				
Address:				
City:	State:		Zip:	
Phone:		Email:		
 The Fiscal Agent understands Education Act of 2006. The Fiscal Agent will use feder supplant existing funds or reduced to the Fiscal Agent will provide, on the Fiscal Agent understands found at: http://www.ed.gov/po The agency agrees to provide at year end. 	and will comply waral funds to supple uce general or oth on request, compand will comply waliciey/fund/reg/ed required description	with the provisions, regularized ement the eligible recipiner funds. Hete and accurate data with all applicable assurigarReg/edgar.html ive and statistical reportations.	tifies the following statements: ulations and rules of the Carl D. Perkins ient's CTE programs of study and will n as required. ances for Federal Grant Funds. These ts, including a written final report and final y on a voluntary plan of correction for ci	ot use federal funds to assurances can be nal expenditure sheet
Print Name of Authorized Fiscal Agent	t		Title	_
Signature of Authorized Fiscal Agent			Date	_
Print Name of Authorized <u>Secondary</u> I	Representative		Title	_
Signature of Authorized Secondary Re	epresentative		Date	_
Print Name of Authorized Postsecond	lary Representati	ve	Title	_

Signature of Authorized **Postsecondary** Representative

Date

Scoring

Each proposal must contain the following information which will be weighted as shown.

Points	Category
100	Project Description
	A. Proposal identifies a CTE Program of Study that meets nontraditional occupations as defined by the RFP
	B. Timeline is clear and responsible parties are identified
	C. Major activities are described and meet the intent of the RFP
	D. Relationship between the project activities and the secondary and postsecondary components of CTE
	Program of Study are addressed
100	Goals & Outcomes
	A. Secondary or/& Postsecondary goals and outcomes are clear and match project activities
	B. Targeted student population is sufficient to meet project goals/outcomes
	C. Current project builds on previously funded activities (if applicable)
80	Project Evaluations
	A. Data on applicant's past performance on Perkins 6S1/5P1 is provided
	B. Evaluation plan and activities are described
	C. Responsible parties for evaluation activities (data collection, final report) are identified
80	Communication of Project's Activities & Accomplishments
	A. Communication Strategies are described
	B. Timeline for activities is clearly identified
80	Budget
	A. Budget narrative matches budget items
	B. Budget narrative explains what budget items are and their purpose
	C. Proposed budget is reasonable
	D. Budget items are allowable pursuant to RFP guidelines
60	Additional Elements & Criteria
	A. Proposal Partners Secondary/Postsecondary
	B. Narrative meets page requirements and is well written
	C. Spelling and Grammar is accurate
500	Total Maximum Points

*Proposals that do not achieve at least 250 points will be disqualified. A proposal will be considered for funding ONLY if the application package is properly signed and completed.

PERKINS NONTRADITIONAL OCCUPATIONS CTE PROGRAMS OF STUDY GRANTS

2013-2014 CHECKLIST

Required

Cover Page (Signed)

Budget

Proposal Narrative

Statement of Assurances (Signed)

Optional

Letters of Support

Other